

*State Plan Under Title XIX of the Social Security Act
State: Massachusetts
Non-Institutional Reimbursement*

13. Home Health

a. Payment for Home Health Services

The Division will reimburse acute hospital outpatient departments as set forth in the Home Health Agency regulations at 130 CMR 403.401-441, at the lower of the most current promulgation of DHCFP fees as established in 114.3 CMR 3.00 or the hospital's usual and customary charge.

b. Physician Payment

In addition to the Home Health Service Payment, when a hospital-based physician or hospital-based entity provides physician services during Home Health Services, the hospital may be reimbursed for such physician services in accordance with Section IV.A.1.

14. Adult Foster Care

a. Payment for Adult Foster Care

The Division will reimburse acute hospital outpatient departments for Adult Foster Care services at the lower of the rates certified by the Office of Purchased Services in the Executive Office of Administration and Finance and as set forth in the Adult Foster Care Guidelines, or the hospital's usual and customary charge.

b. Physician Payment

In addition to the Adult Foster Care Service Payment, when a hospital-based physician or hospital-based entity provides physician services during Adult Foster Care Services, the hospital may be reimbursed for such physician services, in accordance with Section IV.A.1.

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C. Reimbursement for Unique Circumstances

1. Pediatric Specialty Clinics

Payment for services provided in pediatric specialty (non-primary care) outpatient clinics at pediatric specialty hospitals and at hospitals with pediatric specialty (inpatient) units, per Section II, shall equal the weighted average FY90 Medicaid costs per visit for such clinics, multiplied by an inflation factor of 3.35% to reflect inflation between RY92 and RY93; by an inflation factor of 3.01% to reflect inflation between RY93 and RY94; by an inflation factor of 2.80% to reflect inflation between RY94 and RY95; by an inflation factor of 3.16% to reflect inflation between RY95 and RY96; by an inflation factor of 2.38% to reflect inflation between RY96 and RY97; by an inflation factor of 2.14% to reflect inflation between RY97 and RY98; and by an inflation factor of 1.9% to reflect inflation between RY98 and RY99. Based on total FY90 charges, total FY90 costs, total FY90 Medicaid charges, and total FY90 Medicaid visits totaled across all Division-approved pediatric specialty clinics in each qualifying hospital, the Division shall then calculate a cost-to-charge ratio and the Medicaid weighted average charge per visit, and multiply the latter by the former to calculate the weighted average FY90 pediatric specialty clinic cost per visit.

Qualifying hospitals shall have reported FY90 total Medicaid charges and total Medicaid visits individually for each pediatric specialty clinic approved as such by the Division. (FY91 quarterly data may be substituted if the clinic was not open for a full year in FY90.) Henceforth, hospitals will report corresponding charge and visit data on a quarterly basis.

2. Non-Profit Acute Teaching Hospitals Affiliated with a State-Owned University Medical School

- a. Subject to section IV.C.2.b, the payment amount for outpatient, emergency department, and hospital-licensed health center services at non-profit acute care teaching hospitals affiliated with a state-owned university medical school shall be as follows. The data used for this payment will be from the most recent submission of the hospitals' or predecessor hospitals' DHCFP-403 report(s).

The hospital's total outpatient charges are multiplied by the hospital's overall outpatient cost to charge ratio (the hospital's outpatient cost to charge ratio is calculated using the DHCFP-403 total outpatient costs located on schedule II, column 10, line 114 as the numerator and total outpatient charges located on schedule II, column 11, line 114 as the denominator) in order to compute the total outpatient costs. The total outpatient costs are then multiplied by the Medicaid outpatient utilization factor (this factor is calculated by dividing the total Medicaid

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outpatient charges by the total hospital outpatient charges) in order to calculate Medicaid outpatient costs. Medicaid outpatient costs are then multiplied by the inflation rates for those years between the year of the cost report and the current rate year.

- b. Any payment amount in excess of amounts which would otherwise be due any non-profit teaching hospital affiliated with a state-owned university medical school pursuant to sections IV.A and IV.B is subject to specific legislative appropriation and intergovernmental funds transfer.

D. Upper Limit Review and Federal Approval

Payment adjustments may be made for reasons relating to the Upper Limit, if the number of hospitals that apply and qualify changes, if updated information necessitates a change, or as otherwise required by the Health Care Financing Administration (HCFA). If any portion of the reimbursement methodology is not approved by HCFA, the Division may recover any payment made to a hospital in excess of the approved methodology.

E. Future Rate Years

Adjustments may be made each rate year to update rates and shall be made in accordance with the hospital contract in effect on that date.

F. New Hospitals

The rates of reimbursement for a newly participating hospital shall be determined in accordance with the provisions of the RFA to the extent the Division deems possible. If data sources specified by the RFA are not available, or if other factors do not permit precise conformity with the provisions of the RFA, the Division shall select such substitute data sources or other methodology(ies) that the Division deems appropriate in determining hospitals' rates. Such rates may, in the Division's sole discretion, affect computation of any of the efficiency standards applied to outpatient costs.

G. Hospital Change of Ownership

For any hospital which is party to a merger, sale of assets, or other transaction involving the identity, licensure, ownership or operation of the hospital during the effective period of the RFA, the Division, in its sole discretion, shall determine, on a case by case basis (1) whether the

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hospital qualifies for reimbursement under the RFA, and, if so, (2) the appropriate rate of such reimbursement. The Division's determination shall be based on the totality of the circumstances. Any such rate may, in the Division's sole discretion, affect computation of any of the efficiency standards applied to outpatient costs.

Attachment 4.19B(1)

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Exhibit 1

SIGNIFICANT PROCEDURE AND THERAPY APGs

APC 1 Integumentary System

- 001 PHOTOCHEMOTHERAPY
- 002 SUPERFICIAL NEEDLE BIOPSY AND ASPIRATION
- 003 COMPLEX INCISION AND DRAINAGE
- 004 SIMPLE INCISION AND DRAINAGE
- 005 NAIL PROCEDURES
- 006 SIMPLE DEBRIDEMENT AND DESTRUCTION
- 007 COMPLEX EXCISION, BIOPSY AND DEBRIDEMENT
- 008 SIMPLE EXCISION AND BIOPSY
- 009 COMPLEX SKIN REPAIRS INCL INTEGUMENT GRAFTS, TRANSFER & REARRANGE
- 010 SIMPLE SKIN REPAIR
- 011 SIMPLE INCISION AND EXCISION OF BREAST
- 012 BREAST RECONSTRUCTION AND MASTECTOMY

APC 2 Musculoskeletal System

- 021 COMPLEX MUSCULOSKELETAL PROCEDURES EXCLUDING HAND AND FOOT
- 022 SIMPLE MUSCULOSKELETAL PROCEDURES EXCLUDING HAND AND FOOT
- 023 COMPLEX HAND AND FOOT MUSCULOSKELETAL PROCEDURES
- 024 SIMPLE HAND AND FOOT MUSCULOSKELETAL PROCEDURES
- 025 ARTHROSCOPY
- 026 REPLACEMENT OF CAST
- 027 SPLINT, STRAPPING AND CAST REMOVAL
- 028 CLOSED TREATMENT FX & DISLOCATION OF FINGER, TOE & TRUNK
- 029 CLOSED TREATMENT FX & DISLOCATION EXC FINGER, TOE & TRUNK
- 030 OPEN OR PERCUTANEOUS TREATMENT OF FRACTURES
- 031 BONE OR JOINT MANIPULATION UNDER ANESTHESIA
- 032 BUNION PROCEDURES
- 033 ARTHROPLASTY
- 034 HAND AND FOOT TENOTOMY
- 035 ARTHROCENTESIS AND LIGAMENT OR TENDON INJECTION

APC 3 Respiratory System

- 051 PULMONARY TESTS
 - 052 NEEDLE AND CATHETER BIOPSY, ASPIRATION, LAVAGE AND INTUBATION
 - 053 COMPLEX ENDOSCOPY OF THE UPPER AIRWAY
 - 054 SIMPLE ENDOSCOPY OF THE UPPER AIRWAY
 - 055 ENDOSCOPY OF THE LOWER AIRWAY
 - 057 RESPIRATORY THERAPY
-

APC 4 Cardiovascular System

- 071 EXERCISE TOLERANCE TESTS
- 072 ECHOCARDIOGRAPHY
- 073 PHONOCARDIOGRAM
- 074 CARDIAC ELECTROPHYSIOLOGIC TESTS
- 075 PLACEMENT OF TRANSVENOUS CATHETERS
- 076 DIAGNOSTIC CARDIAC CATHETERIZATION
- 077 ANGIOPLASTY AND TRANSCATHETER PROCEDURES
- 078 PACEMAKER INSERTION AND REPLACEMENT
- 079 REMOVAL AND REVISION OF PACEMAKER AND VASCULAR DEVICE
- 080 MINOR VASCULAR REPAIR AND FISTULA CONSTRUCTION
- 081 SECONDARY VARICOSE VEINS AND VASCULAR INJECTION
- 082 VASCULAR LIGATION
- 083 RESUSCITATION AND CARDIOVERSION
- 084 CARDIAC REHABILITATION

APC 5 Hematologic, Lymphatic and Endocrine

- 091 CHEMOTHERAPY BY EXTENDED INFUSION
- 092 CHEMOTHERAPY EXCEPT BY EXTENDED INFUSION
- 093 PHLEBOTOMY
- 094 BLOOD AND BLOOD PRODUCT EXCHANGE
- 095 DEEP LYMPH STRUCTURE AND THYROID PROCEDURES
- 096 ALLERGY TESTS
- 097 TRANSFUSION

APC 6 Digestive System

- 111 ALIMENTARY TESTS AND SIMPLE TUBE PLACEMENT
- 112 ESOPHAGEAL DILATION WITHOUT ENDOSCOPY
- 113 ANOSCOPY WITH BIOPSY AND DIAGNOSTIC PROCTOSIGMOIDOSCOPY
- 114 PROCTOSIGMOIDOSCOPY WITH EXCISION OR BIOPSY
- 115 DIAGNOSTIC UPPER GI ENDOSCOPY OR INTUBATION
- 116 THERAPEUTIC UPPER GI ENDOSCOPY OR INTUBATION
- 117 LOWER GASTROINTESTINAL ENDOSCOPY
- 118 ERCP AND MISCELLANEOUS GI ENDOSCOPY PROCEDURES
- 119 HERNIA AND HYDROCELE PROCEDURES
- 120 COMPLEX ANAL AND RECTAL PROCEDURES
- 121 SIMPLE ANAL AND RECTAL PROCEDURES
- 122 MISCELLANEOUS ABDOMINAL PROCEDURES
- 123 COMPLEX LAPAROSCOPIC PROCEDURES
- 124 SIMPLE LAPAROSCOPIC PROCEDURES

APC 7 Urinary System

- 131 RENAL EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY
- 132 SIMPLE URINARY STUDIES AND PROCEDURES
- 133 URINARY CATHETERIZATION AND DILATATION
- 134 COMPLEX CYSTOURETHROSCOPY AND LITHOLAPAXY
- 135 MODERATE CYSTOURETHROSCOPY
- 136 SIMPLE CYSTOURETHROSCOPY
- 137 COMPLEX URETHRAL PROCEDURES
- 138 SIMPLE URETHRAL PROCEDURES
- 139 HEMODIALYSIS
- 140 PERITONEAL DIALYSIS

APC 8 Male Genital System

- 151 TESTICULAR AND EPIDIDYMAL PROCEDURES
- 152 INSERTION OF PENILE PROSTHESIS
- 153 COMPLEX PENILE PROCEDURES
- 154 SIMPLE PENILE PROCEDURES
- 155 PROSTATE NEEDLE AND PUNCH BIOPSY

APC 9 Female Genital System

- 171 ARTIFICIAL FERTILIZATION
- 172 PROCEDURES FOR PREGNANCY AND NEONATAL CARE
- 173 TREATMENT OF SPONTANEOUS ABORTION
- 174 THERAPEUTIC ABORTION
- 175 VAGINAL DELIVERY
- 176 COMPLEX FEMALE REPRODUCTIVE PROCEDURES
- 177 SIMPLE FEMALE REPRODUCTIVE PROCEDURES
- 178 DILATION AND CURETTAGE
- 179 HYSTEROSCOPY
- 180 COLPOSCOPY

APC 10 Nervous System

- 191 EXTENDED EEG STUDIES
 - 192 ELECTROENCEPHALOGRAM
 - 193 ELECTROCONVULSIVE THERAPY
 - 194 NERVE AND MUSCLE TESTS
 - 195 NERVOUS SYSTEM INJECTIONS, STIMULATIONS OR CRANIAL TAP
 - 196 REVISION AND REMOVAL OF NEUROLOGICAL DEVICE
 - 197 NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION
 - 198 NERVE REPAIR AND DESTRUCTION
 - 199 SPINAL TAP
-

APC 11 Eye and Ocular Adnexa

- 211 MINOR OPHTHALMOLOGICAL TESTS AND PROCEDURES
- 212 FITTING OF CONTACT LENSES
- 213 LASER EYE PROCEDURES
- 214 CATARACT PROCEDURES
- 215 COMPLEX ANTERIOR SEGMENT EYE PROCEDURES
- 216 MODERATE ANTERIOR SEGMENT EYE PROCEDURES
- 217 SIMPLE ANTERIOR SEGMENT EYE PROCEDURES
- 218 COMPLEX POSTERIOR SEGMENT EYE PROCEDURES
- 219 SIMPLE POSTERIOR SEGMENT EYE PROCEDURES
- 220 STRABISMUS AND MUSCLE EYE PROCEDURES
- 221 COMPLEX REPAIR AND PLASTIC PROCEDURES OF EYE
- 222 SIMPLE REPAIR AND PLASTIC PROCEDURES OF EYE
- 223 VITRECTOMY

APC 12 Facial, Ear, Nose, Mouth and Throat

- 231 COCHLEAR DEVICE IMPLANTATION
- 232 OTORHINOLARYNGOLOGIC FUNCTION TESTS
- 233 NASAL CAUTERIZATION AND PACKING
- 234 COMPLEX FACIAL AND ENT PROCEDURES
- 235 SIMPLE FACIAL AND ENT PROCEDURES
- 236 TONSIL AND ADENOID PROCEDURES
- 237 SIMPLE AUDIOMETRY

APC 13 Therapeutic and Other Significant Radiological Procedures

- 251 THERAPEUTIC NUCLEAR MEDICINE
- 252 RADIATION THERAPY AND HYPERTHERMIA
- 253 VASCULAR RADIOLOGY EXCEPT FOR VENOGRAPHY OF EXTREMITY
- 254 MYELOGRAPHY
- 255 MISCELLANEOUS RADIOLOGICAL PROCEDURES WITH CONTRAST

APC 14 Physical Medicine and Rehabilitation

- 271 OCCUPATIONAL THERAPY
- 272 PHYSICAL THERAPY
- 273 SPEECH THERAPY

APC 15 Mental Illness and Substance Abuse Therapies

- 281 NEUROPSYCHOLOGICAL TESTING
- 282 FULL DAY PARTIAL HOSPITALIZATION FOR SUBSTANCE ABUSE
- 283 FULL DAY PARTIAL HOSPITALIZATION FOR MENTAL ILLNESS
- 284 HALF DAY PARTIAL HOSPITALIZATION FOR SUBSTANCE ABUSE

- 285 HALF DAY PARTIAL HOSPITALIZATION FOR MENTAL ILLNESS
286 COUNSELLING OR INDIVIDUAL BRIEF PSYCHOTHERAPY
287 INDIVIDUAL COMPREHENSIVE PSYCHOTHERAPY
288 FAMILY PSYCHOTHERAPY
289 GROUP PSYCHOTHERAPY

ANCILLARY SERVICES APGs

APC 16 Radiology

- 301 COMPLEX DIAGNOSTIC NUCLEAR MEDICINE
302 INTERMEDIATE DIAGNOSTIC NUCLEAR MEDICINE
303 SIMPLE DIAGNOSTIC NUCLEAR MEDICINE
304 OBSTETRICAL ULTRASOUND
305 DIAGNOSTIC ULTRASOUND EXCEPT OBSTETRICAL
306 MAGNETIC RESONANCE IMAGING
307 COMPUTERIZED AXIAL TOMOGRAPHY
308 A MAMMOGRAPHY
309 DIGESTIVE RADIOLOGY
310 PLAIN FILM
311 THERAPEUTIC RADIATION TREATMENT PREPARATION

APC 17 Anesthesia

- 321 ANESTHESIA

APC 18 Pathology

- 331 COMPLEX PATHOLOGY
332 SIMPLE PATHOLOGY
333 PAP SMEARS

APC 19 Laboratory

- 341 BLOOD AND TISSUE TYPING
342 COMPLEX IMMUNOLOGY TESTS
343 SIMPLE IMMUNOLOGY TESTS
344 COMPLEX MICROBIOLOGY TESTS
345 SIMPLE MICROBIOLOGY TESTS
346 COMPLEX ENDOCRINOLOGY TESTS
347 SIMPLE ENDOCRINOLOGY TESTS
348 COMPLEX CHEMISTRY TESTS
349 SIMPLE CHEMISTRY TESTS
350 BASIC CHEMISTRY TESTS
351 MULTICHANNEL CHEMISTRY TESTS

- 352 ORGAN OR DISEASE ORIENTED PANELS
- 353 TOXICOLOGY TESTS
- 354 THERAPEUTIC DRUG MONITORING
- 355 COMPLEX CLOTTING TESTS
- 356 SIMPLE CLOTTING TESTS
- 357 COMPLEX HEMATOLOGY TESTS
- 358 SIMPLE HEMATOLOGY TESTS
- 359 URINALYSIS
- 360 BLOOD AND URINE DIPSTICK TESTS

APC 20 Other Ancillary Tests and Procedures

- 371 SIMPLE PULMONARY FUNCTION TESTS
- 372 INFUSION THERAPY EXCEPT CHEMOTHERAPY
- 373 CARDIOGRAM
- 374 COMPLEX IMMUNIZATION
- 375 MODERATE IMMUNIZATION
- 376 SIMPLE IMMUNIZATION AND ALLERGY IMMUNOTHERAPY
- 377 MINOR REPRODUCTIVE PROCEDURES
- 378 MINOR CARDIAC AND VASCULAR TESTS
- 379 MINOR OPHTHALMOLOGICAL INJECTION, SCRAPING AND TESTS
- 380 PACEMAKER ANALYSIS
- 381 TUBE CHANGE
- 382 PROVISION OF VISION AIDS
- 383 INTRODUCTION OF NEEDLE AND CATHETER
- 384 DRESSINGS AND OTHER MINOR PROCEDURES
- 385 OTHER MISCELLANEOUS ANCILLARY PROCEDURES
- 386 BIOFEEDBACK AND OTHER TRAINING

APC 21 Chemotherapy Drugs

- 391 CLASS ONE CHEMOTHERAPY DRUGS
- 392 CLASS TWO CHEMOTHERAPY DRUGS
- 393 CLASS THREE CHEMOTHERAPY DRUGS
- 394 CLASS FOUR CHEMOTHERAPY DRUGS
- 395 CLASS FIVE CHEMOTHERAPY DRUGS

APC 22 Ancillary Mental Illness and Substance Abuse Services

- 411 PSYCHOTROPIC MEDICATION MANAGEMENT
- 412 ACTIVITY THERAPY

APC 23 Incidental Procedures and Services

- 421 INCIDENTAL TO MEDICAL, SIGNIFICANT PROCEDURE OR THERAPY VISIT
- 422 MEDICAL VISIT INDICATOR

MEDICAL APGs

APC 24 Malignancy

- 431 HEMATOLOGICAL MALIGNANCY
- 432 PROSTATIC MALIGNANCY
- 433 LUNG MALIGNANCY
- 434 BREAST MALIGNANCIES
- 435 GI MALIGNANCIES
- 436 SKIN MALIGNANCY
- 437 OTHER MALIGNANCIES

APC 25 Poisoning

- 451 POISONING

APC 26 Trauma

- 461 HEAD AND SPINE INJURY
- 462 MINOR SKIN AND SOFT TISSUE INJURIES EXCEPT BURNS
- 463 SKIN AND SOFT TISSUE INJURIES EXCEPT BURNS
- 464 FRACTURE, DISLOCATION AND SPRAIN
- 465 BURNS
- 466 OTHER INJURIES

APC 27 Neonate

- 481 NEONATE AND CONGENITAL ANOMALY

APC 28 Pregnancy

- 491 ROUTINE PRENATAL CARE
- 492 MATERNAL ANTEPARTUM COMPLICATION
- 493 ROUTINE POSTPARTUM CARE
- 494 MATERNAL POSTPARTUM COMPLICATION

APC 29 Infectious Diseases

- 501 COMPLEX INFECTIOUS DISEASE
- 502 MISCELLANEOUS INFECTIOUS DISEASES
- 503 INFECTIOUS DISEASES OF GENITAL ORGANS

APC 30 Nervous System Diseases

- 511 TIA, CVA AND OTHER CEREBROVASCULAR EVENTS
 - 512 HEADACHE
-

- 513 EPILEPSY
- 514 NON TRAUMATIC LOSS OF CONSCIOUSNESS
- 515 OTHER DISEASES OF THE NERVOUS SYSTEM

APC 31 Eye Diseases

- 531 CATARACTS
- 532 REFRACTION DISORDER
- 533 CONJUNCTIVITIS AND OTHER SIMPLE EXTERNAL EYE INFLAMMATION
- 534 EYE DISEASES EXCEPT CATARACT, REFRACTION DISORDER
& CONJUNCTIVITIS

APC 32 Ear, Nose, Mouth and Throat Diseases

- 541 DENTAL DISEASE
- 542 INFLUENZA, URI AND ENT INFECTIONS
- 543 HEARING LOSS
- 544 OTHER COMPLEX EAR, NOSE, THROAT AND MOUTH DISEASES
- 545 OTHER SIMPLE EAR, NOSE, THROAT AND MOUTH DISEASES

APC 33 Respiratory System Diseases

- 561 EMPHYSEMA, CHRONIC BRONCHITIS, AND ASTHMA
- 562 PNEUMONIA
- 563 COMPLEX RESPIRATORY DIS EXC EMPHYSEMA, CHR BRONCHITIS
& ASTHMA
- 564 SIMPLE RESPIRATORY DIS EXC EMPHYSEMA, CHR BRONCHITIS
& ASTHMA

APC 34 Cardiovascular System Diseases

- 571 CONGESTIVE HEART FAILURE AND ISCHEMIC HEART DISEASE
- 572 HYPERTENSION
- 573 CHEST PAIN W CARDIAC ENZYMES TO RULE OUT MYOCARDIAL INFARCT
- 574 CHEST PAIN WO CARDIAC ENZYMES TO RULE OUT MYOCARDIAL
INFARCT
- 575 SIMPLE CARDIOVASCULAR DIS EXC CHF, ISCHEMIC HEART DIS
& HYPERTN
- 576 COMPLEX CARDIOVASCULAR DIS EXC CHF, ISCHEMIC HEART DIS
& HYPERTN

APC 35 Digestive System Diseases

- 591 NONINFECTIOUS GASTROENTERITIS
- 592 ULCERS, GASTRITIS AND ESOPHAGITIS
- 593 HEPATOBILIARY DISEASE
- 594 HERNIA

-
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- 595 HEMORRHOIDS AND OTHER ANAL-RECTAL DISEASES
 - 596 OTHER COMPLEX GASTROINTESTINAL DISEASES
 - 597 OTHER SIMPLE GASTROINTESTINAL DISEASES

APC 36 Major Signs, Symptoms and Findings

- 611 MAJOR SIGNS, SYMPTOMS AND FINDINGS

APC 37 Musculoskeletal Diseases

- 621 BACK DISORDERS
- 622 COMPLEX MUSCULOSKELETAL DISEASES EXCEPT BACK DISORDERS
- 623 SIMPLE MUSCULOSKELETAL DISEASES EXCEPT BACK DISORDERS

APC 38 Skin and Breast Diseases

- 631 DISEASE OF NAILS
- 632 CHRONIC SKIN ULCER
- 633 CELLULITIS, IMPETIGO AND LYMPHANGITIS
- 634 BREAST DISEASES
- 635 SKIN DISEASES

APC 39 Endocrine, Nutritional and Metabolic Diseases

- 651 DIABETES
- 652 COMPLEX ENDOCRINE, NUTRIT & METABOLIC DIS EXC DIABETES & OBESITY
- 653 SIMPLE ENDOCRINE, NUTRITIONAL & METABOLIC DISEASE EXC DIABETES
- 654 FLUID AND ELECTROLYTE DISORDERS

APC 40 Kidney and Urinary Tract Diseases

- 661 URINARY TRACT INFECTION
- 662 RENAL FAILURE
- 663 COMPLEX URINARY DIS EXC URINARY TRACT INFECTION & RENAL FAILURE
- 664 SIMPLE URINARY DIS EXC URINARY TRACT INFECTION & RENAL FAILURE

APC 41 Male Genital System Diseases

- 671 BENIGN PROSTATIC HYPERTROPHY
 - 672 MALE REPRODUCTIVE DISEASES EXCEPT BENIGN PROSTATIC HYPERTROPHY
-

APC 42 Female Genital System Diseases

681 GYNECOLOGIC DISEASES

APC 43 Immunologic and Hematologic Diseases

691 HIV INFECTION

692 ANEMIA

693 OTHER COMPLEX IMMUNOLOGIC AND HEMATOLOGIC DISEASE

694 OTHER SIMPLE IMMUNOLOGIC AND HEMATOLOGIC DISEASE

APC 44 Well Care, Administrative

701 ADULT MEDICAL EXAMINATION

702 WELL CHILD CARE

703 CONTRACEPTION AND PROCREATIVE MANAGEMENT

704 AFTERCARE

705 NONSPECIFIC SIGNS & SYMPTOMS & OTH CONTACTS W HEALTH SVCS

APC 45 Unknown Cause of Mortality

721 UNKNOWN CAUSE OF MORTALITY

APC 46 Error

992 INVALID PROCEDURE CODE

993 INPATIENT PROCEDURE

994 AUTOPSY SERVICES

995 NON COVERED CARE SETTINGS AND SERVICES

996 INVALID RVDX CODE

997 ECODE CANNOT BE USED AS RVDX

998 UNACCEPTABLE RVDX, REQUIRES PROCEDURE

999 UNGROUPABLE